

Political Organization  
Notice of Section 527 Status**Part I General Information**

1 Name of organization COASTAL EMPLOYEE ACTION FUND OF TEXAS		Employer identification number 76 0202201
2 Mailing address (P.O. Box or number, street, and room or suite number) 9 GREENWAY PLAZA #712		
City or town, state, and ZIP code HOUSTON, TX 77046		
3 E-mail address of organization cara.cejka@coastalcorp.com		
4a Name of custodian of records Cara Cejka	4b Custodian's address 9 GREENWAY PLAZA #712 HOUSTON, TX 77046	
5a Name of contact person Cara Cejka	5b Contact person's address 9 GREENWAY PLAZA #712 HOUSTON, TX 77046	
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number  City or town, state, and ZIP code		

**Part II Purpose**

7 Describe the purpose of the organization  
 The purpose of the organization is to receive contributions and make expenditures pursuant to the Texas Campaign Finance Act, and to engage in activities not otherwise prohibited by the Texas Campaign Finance Act. The organization files periodic reports of contributions and expenditures with the Texas Election Commission, and these reports are made available to the public in the offices of the Texas Election Commission and on the Internet.

**Part III List of All Related Entities (see instructions)**

8a Name of related entity	8b Relationship	8c Address
COASTAL EMPLOYEE ACTION FUND	CONNECTED	9 GREENWAY PLAZA #712 HOUSTON, TX 77046
THE COASTAL CORP/ ANR EMPLOYEE ACTION FUND	CONNECTED	9 GREENWAY PLAZA #712 HOUSTON, TX 77046
THE COASTAL CORPORATION	CONNECTED	9 GREENWAY PLAZA #712 HOUSTON, TX 77046

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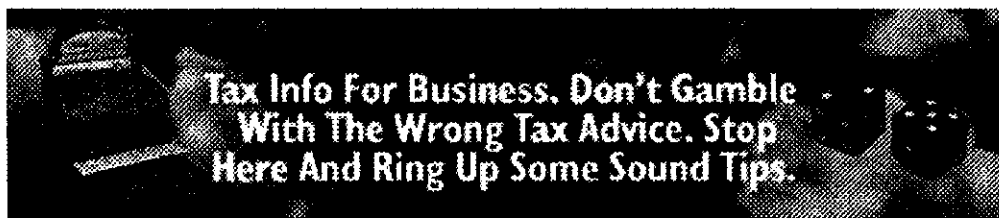
OGDEN, UT

**9a Name**

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of authorized official

Date \_\_\_\_\_



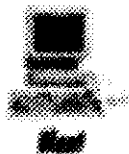
## Political Organization Notice of Section 527 Status

Please enter information below to fulfill your requirements for electronic filing of Form 8871:

Employer Identification Number	76 - 0263473
Name of Organization	The Coastal Corporation/ANR Employee
Street Address	500 Renaissance Center
City	Detroit
State	MI
Zip Code	48243
Email address of Organization	cara.cejka@coastalcorp.com
Name of Custodian of Records	Cara Cejka
Name of Contact Person	Cara Cejka

File Electronically

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